This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

| APPLICATION NUMBER: | | | | | • | • . |
|----------------------------|-----------------|-------------------|---------------------------|------------|------------|-------------|
| ٠., | ٠ | | | • | | • • |
| | | Total Fee | e Calculatio | n . | . • | |
| • | Fee Cade | Total # Claims | Number Extra X | Fee | _ | |
| | Sm/lg. | | | Sm. Entity | Fee = | Total |
| Basic Filing Fee | 201/101 | . / | | 380 | Lg. Entity | |
| Fotal Claims >20 | 203/103 | 24 -20= | $\cdot \not = \mathbf{x}$ | 86 | - | |
| Independent Claims >3 | 202/102 | -3 = | x | | | . —— |
| Mult Dep Claim Present | 204/104 | | | | | |
| Surcharge | 205/105 | | | 1.5 | | |
| English Translation | 139 | | | <u> </u> | | |
| TOTAL FEE CALCULA | NOTTON . | | , | | • | · <u></u> |
| Fees due upon filing th | le application: | | | | | |
| Total Filing Fees Due | | P | 81 | · | | |
| Less Filing Fees Submi | itted - S | | | | , | |
| BALANCE DUE | = \$ | 4 | 8/ | | • | • |
| Office of Initial Patent F | Examination | | | | | |
| FORM OPE-RAM-01 (Rev. | 12/97) | : | · | | | |